



## **Fever United Soccer Club**

### **PARTICIPANT RELEASE AND WAIVER OF LIABILITY**

I understand that playing or participating in the sport of soccer may be a potentially dangerous activity involving risk of injury. I understand that in any contact sport, such as soccer, an athletic participant can be seriously injured. I am aware that the dangers and risks of my child's/ward's playing or participating in soccer, but are not limited to, falls, contact or collisions with other participants, equipment and facilities, and the effects of weather, including high heat and humidity.

I have certified to Fever United soccer Club, its owner, employees, agents and representatives, by my signature below, that my child is in good health and physical condition and sufficiently able to participate in soccer and the Fever United soccer training program. I have advised Fever United Coach of any limitations on my child's/ward's activities for medical reasons in writing below. It is my responsibility to make sure that any coach within the Fever United Organization is aware of any health problems my player may have. Knowing and having been informed of the potential dangers and risks associated with playing soccer, and in consideration of my child/ward being allowed to participate in the Fever United program, I hereby agree on behalf of myself, my family members and my child/ward to assume all such risks and, further, to waive, release, discharge and hold harmless Fever United Soccer Club, its owner, employees, contractors, agents and representatives from any and all liability, actions, causes of actions, claims or demands for personal injury and/or illness of any kind or nature, and any other claims whatsoever arising out of, or in any way connected with, my child's/ward's playing and participating in soccer and the Fever United Soccer program. I fully understand that the athletic participant will be held responsible for all property damage. This Release and Waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

I hereby consent to permit the coach and staff working for Fever United coaches to provide emergency first-aid or medical treatment for my child/ward, according to their best judgment, in the event he/she suffers an injury or illness while participating in the Fever United Soccer program.

Fever United is not responsible for personal items that are lost, stolen or damaged. I also understand that pictures and or video taken in the course of the athlete's involvement in the Fever United program may be used in any promotional materials.



**PARTICIPANT RELEASE AND WAIVER OF LIABILITY FOR FEVER UNITED**

Athlete's Name: \_\_\_\_\_

Any Limitations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature states I received and agreed Fever United waiver for spring Break Camp( The

Future March 9-11

Signature of Parent/Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_